

SERIAL NUMBER <b>09/456,670</b>	FILING DATE <b>12/09/99</b>	CLASS <b>399</b>	GROUP ART UNIT <b>2852</b>	ATTORNEY DOCKET NO. <b>SAOL: P0107US</b>
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APPLICANT

**YOICHI SHIMAZAWA, NARA-SHI, JAPAN; SYOICHIRO YOSHIURA, TENRI-SHI, JAPAN.**

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
**VERIFIED**  
No *dt*

  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
**VERIFIED**  
\_\_\_\_\_

  
  
  
  
  
  
  
  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
**VERIFIED                  JAPAN                  P10-349741                  12/09/98**  
Yes *dt*

  
  
  
  
  
  
  
  
  
  

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/18/00**

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>dt</i> Examiner's Initials _____ Initials _____	STATE OR COUNTRY <b>JPX</b>	SHEETS DRAWING <b>7</b>	TOTAL CLAIMS <b>7</b>	INDEPENDENT CLAIMS <b>1</b>
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ADDRESS

**NEIL A DUCHEZ**  
**RENNER OTTO BOISSELLE & SKLAR PLL**  
**1621 EUCLID AVENUE**  
**19TH FLOOR**  
**CLEVELAND OH 44115**

TITLE

**IMAGE FORMING APPARATUS**

FILING FEE RECEIVED  <b>\$760</b>	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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